

Fill in this information to identify the case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____ Chapter 7☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/25

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Two Yolks Cafe, LLC</u>	
2. All other names debtor used in the last 8 years <small>Include any assumed names, trade names and <i>doing business as</i> names</small>	<u>Two Yolks Cafe</u>	
3. Debtor's federal Employer Identification Number (EIN)	<u>87-2539140</u>	
4. Debtor's address	Principal place of business <u>1099 S. Beacon Blvd.</u> <u>Grand Haven, MI 49417</u> <small>Number, Street, City, State & ZIP Code</small> <u>Ottawa</u> <small>County</small>	Mailing address, if different from principal place of business <u>1106 Pennoyer Ave</u> <u>Grand Haven, MI 49417</u> <small>P.O. Box, Number, Street, City, State & ZIP Code</small> Location of principal assets, if different from principal place of business _____ <small>Number, Street, City, State & ZIP Code</small>
5. Debtor's website (URL)	<u>https://twoyolkscfe.com/</u>	
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	

Debtor **Two Yolks Cafe, LLC**
Name

Case number (if known)

7. Describe debtor's business A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

7225**8. Under which chapter of the Bankruptcy Code is the debtor filing?** *Check one:*☒ Chapter 7☐ Chapter 9☐ Chapter 11. *Check all that apply:*

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,424,000 (amount subject to adjustment on 4/01/28 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District _____

When _____

Case number _____

District _____

When _____

Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☒ No☐ Yes.

Debtor **Two Yolks Cafe, LLC**
Name

Case number (if known)

List all cases. If more than 1,
attach a separate listDebtor
District

When

Relationship

Case number, if known

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other**Where is the property?**

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes.

Insurance agency

Contact name

Phone

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☒ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Two Yolks Cafe, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 20, 2025**

MM / DD / YYYY

X /s/ Joanna Peterson

Signature of authorized representative of debtor

Joanna Peterson

Printed name

Title **Member/Registered Agent****18. Signature of attorney****X /s/ Bronte Reisinger**

Signature of attorney for debtor

Date **May 20, 2025**

MM / DD / YYYY

Bronte Reisinger P84320

Printed name

Reisinger Law Firm PLLC

Firm name

4131 Embassy Drive SE**Grand Rapids, MI 49546**

Number, Street, City, State & ZIP Code

Contact phone **616.323.3164**Email address **bkreisinger@reisingerlaw.com****P84320 MI**

Bar number and State

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 20, 2025**X /s/ Joanna Peterson**

Signature of individual signing on behalf of debtor

Joanna Peterson

Printed name

Member/Registered Agent

Position or relationship to debtor

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ <u>58,855.00</u>
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ <u>58,855.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>50,000.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>91,000.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>331,611.88</u>
4. Total liabilities	
Lines 2 + 3a + 3b	\$ <u>472,611.88</u>

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Chase Bank-Negative Balance Date of Filing****Checking****9662****\$0.00**3.2. **Flagstar Bank-Negative Balance Date of Filing****Checking****4087****\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Debtor **Two Yolks Cafe, LLC**
Name

Case number (If known) _____

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Three Complete Patio Sets-Black with 4 Chairs Each	\$0.00	Comparable sale	\$2,500.00
	Three 5 Seat Tables-Black	\$0.00	Replacement	\$500.00
	Fourteen 4 Seat Tables-Black	\$0.00	Replacement	\$3,500.00
	Twelve 2 Seater Dining Tables-Black	\$0.00	Replacement	\$1,200.00
	Eighty-Five Dining Chairs-Detached Seat Lancaster Table & Seating Red Hairpin Cafe Chair with 1 1/4 inch Padded Seat	\$0.00	Replacement	\$3,180.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Seven Camera Security System-HD 8 Channel NVR, Channel NVR, Real Time 60 FPS-Network Ready with Night Vision	\$0.00	N/A	\$1,700.00
	4 Speaker Sound System with Receiver	\$0.00	N/A	\$2,000.00
	Large Television	\$0.00	Replacement	\$500.00

Debtor Two Yolks Cafe, LLC Case number (If known) _____
 Name

Pager System	\$0.00	Replacement	\$250.00
Toast, INC Point of Sale (POS) System Package	\$0.00	Comparable sale	\$500.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** **\$15,830.00**
 Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Two 48 Inch Griddles-Atosa CookRite Heavy Duty	\$0.00	Comparable sale	\$3,000.00
Atosa CookRite Range--Natural Gas--Commercial Grade 4 Burner Stove with Oven	\$0.00	Comparable sale	\$1,500.00
Two Restaurant Grade Deep Fryers--Imperial	\$0.00	Comparable sale	\$1,200.00
Large 3 Door Condiment Cooler Station-True Refrigerator	\$0.00	Comparable sale	\$2,000.00
Large 2 Door Cooler Station-True Refrigerator	\$0.00	Comparable sale	\$1,350.00

Debtor	Two Yolks Cafe, LLC	Case number (If known)	
	Name		
2 Door Upright Cooler-True Refrigerator	\$0.00	Comparable sale	\$2,000.00
1 Door Upright Freezer-True Refrigerator	\$0.00	Comparable sale	\$1,200.00
2 Drawer Cooler-True Refrigerator	\$0.00	Comparable sale	\$1,000.00
Five Large Restaurant Prep Tables-BK Resources Economy Equipment	\$0.00	Comparable sale	\$1,500.00
Nine Large 3-4 Tier Storage Racks	\$0.00	Comparable sale	\$1,500.00
Steam Table	\$0.00	Comparable sale	\$600.00
Food Warmer	\$0.00	Comparable sale	\$500.00
Two Heat Lamps	\$0.00	Appraisal	\$150.00
3 Basin Sink-KTi Economy Sink	\$0.00	Comparable sale	\$500.00
Vegatable Washing Station	\$0.00	Comparable sale	\$300.00
Dish Washing Sprayer Station	\$0.00	Comparable sale	\$300.00
Two Commercial Grade Bunn Coffee Stations/Makers	\$0.00	Comparable sale	\$1,000.00
Immersion Blender	\$0.00	Comparable sale	\$150.00
Food Processor	\$0.00	Replacement	\$75.00
Three Metal Rolling Dish Carts	\$0.00	Comparable sale	\$600.00
Three Bus Tub Carts	\$0.00	Comparable sale	\$200.00
Twelve Bus Tubs	\$0.00	Replacement	\$200.00
Juice Machine	\$0.00	Replacement	\$2,500.00
Commercial Toaster	\$0.00	Comparable sale	\$500.00
Two Microwaves--Standard Household Models	\$0.00	Comparable sale	\$150.00

Debtor Two Yolks Cafe, LLC Case number (If known) _____

Name

Thirty-Five Condiment Caddies (Sugar Holder, Ketchup Bottle, Salt/Peper Shaker, Syrup)	\$0.00	Replacement	\$350.00
Thirty Five Jam Caddies	\$0.00	Replacement	\$250.00
Commercial Kitchen Hood Vent system (15ft by 6 ft Exhaust Hood w/ PSP, Fan with Roof Curb, Heated Supply Dan w/ Roof Curb, Wall Panel, Ceiling Enclosure and electrical panel)	\$0.00	Comparable sale	\$9,000.00
Two Business Signs: 4' x 10'x 3Mil Ulupanel Unlit Sign and 15.5x120 Polycarbonate Sign Panel for Existing Pylon Sign	\$0.00	Replacement	\$350.00
Commercial Microwave	\$0.00	Comparable sale	\$600.00
Avantco Ice Machine-Cooled Modular Half Cube Ice Machine	\$0.00	Comparable sale	\$3,500.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$38,025.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

☒ No☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

☒ No☐ Yes**Part 9: Real property**

54. Does the debtor own or lease any real property?

☒ No. Go to Part 10.☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☒ No. Go to Part 11.☐ Yes Fill in the information below.**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes Fill in the information below.**Current value of
debtor's interest**

71. Notes receivable

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 5

Debtor	Two Yolks Cafe, LLC <small>Name</small>	Case number <i>(If known)</i> _____
	Description (include name of obligor)	
72.	Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local)	
73.	Interests in insurance policies or annuities	
74.	Causes of action against third parties (whether or not a lawsuit has been filed)	
75.	Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims	
76.	Trusts, equitable or future interests in property	
77.	Other property of any kind not already listed <i>Examples: Season tickets, country club membership</i>	
	Bulk Coffee Mugs/Cups--100	\$320.00
	32 Oz Coke Cups-Plastic--100	\$300.00
	12 Oz Blue Water Cups-Plastic	\$50.00
	Large Porcelain Plates--100-Mix of Circle and Oval-White	\$1,000.00
	Small Round Plates--White--30	\$100.00
	Bulk Utensils (Forks, Knives and Spoons)	\$100.00
	Assorted Pots/Pans/Containers	\$800.00
	Salt/Pepper Shakers and Syrup Serving Containers	\$60.00
	Misc. Wall Art---15-20 Pieces	\$300.00
	Misc Cake Stands and Dessert Trays	\$50.00
	Booster Seats-3 Wood, 1 Plastic	\$70.00
	Host Stand and Misc. Wooden Shelving for Front of House	\$50.00

Debtor Two Yolks Cafe, LLC
Name

Case number (If known) _____

Perishable Food Items in Freezer (Walk In)\$1,500.00Non-perishable Food Items\$300.0078. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$5,000.0079. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**☒ No☐ Yes

Debtor **Two Yolks Cafe, LLC**
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$15,830.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$38,025.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$5,000.00	
91. Total. Add lines 80 through 90 for each column	\$58,855.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$58,855.00

Fill in this information to identify the case:Debtor name **Two Yolks Cafe, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Commercial Bank-Greenville <small>Creditor's Name</small> 10530 W. Carson City RD PO Box 607 Greenville, MI 48838 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred 12-28-2021 Last 4 digits of account number 9365 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien 1106 Pennoyer Ave, Grand Haven, MI 49417--Business Owners Personal Property-Cross-Collateral Agreement and Mortgage filed in Ottawa County Register of Deeds Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50,000.00	\$0.00

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$50,000.00**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Commercial Bank-BLP Dept ATTN: Alma BLP 301 N. State St. Alma, MI 48801	Line 2.1	

Fill in this information to identify the case:Debtor name **Two Yolks Cafe, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 21125 Philadelphia, PA 19114	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$21,000.00	\$21,000.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Michigan Department of Treasur P.O. Box 30199 Lansing, MI 48909-7699	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$70,000.00	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor Two Yolks Cafe, LLC		Case number (if known) _____	
Name			
3.1	Nonpriority creditor's name and mailing address ABC/Amega 500 Seneca St. Suite 503 Buffalo, NY 14204 Date(s) debt was incurred _____ Last 4 digits of account number <u>4012</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Johnson Controls Fire Protection</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,266.57
3.2	Nonpriority creditor's name and mailing address American Express PO Box 981535 El Paso, TX 79998 Date(s) debt was incurred _____ Last 4 digits of account number <u>1006</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,011.19
3.3	Nonpriority creditor's name and mailing address Beyond Finance P.O. Box 660442 Dallas, TX 75266 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.4	Nonpriority creditor's name and mailing address Bonnie Nolan 43 Elm Ct. Muskegon, MI 49445 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Advertising/The Town Hall Guide</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$687.00
3.5	Nonpriority creditor's name and mailing address Capital One Business Po Box 4069 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number <u>2009</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,900.85
3.6	Nonpriority creditor's name and mailing address Chase Bank 340 S. Cleveland Ave Bldg 370 Westerville, OH 43081 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$726.62
3.7	Nonpriority creditor's name and mailing address Commercial Bank-Greenville 10530 W. Carson City RD PO Box 607 Greenville, MI 48838 Date(s) debt was incurred <u>02/23/2022</u> Last 4 digits of account number <u>9390</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,691.00

Debtor **Two Yolks Cafe, LLC**

Case number (if known) _____

Name

3.8 Nonpriority creditor's name and mailing address

Commercial Bank-Greenville
10530 W. Carson City RD
PO Box 607
Greenville, MI 48838

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **2 UCC Filing Statements Filed March and April 2025**Is the claim subject to offset? ☒ No ☐ Yes**Unknown**

3.9 Nonpriority creditor's name and mailing address

Cozzini
8430 W Bryn Mawr Ave
Suite 800
Chicago, IL 60631

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$300.00**

3.10 Nonpriority creditor's name and mailing address

Electrical Maintenance Corp
16710 Juniper Dr.
Conklin, MI 49403

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$883.51**

3.11 Nonpriority creditor's name and mailing address

Flagstar Bank
ATTN BK
5151 Corporate Dr.
Troy, MI 48098

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$625.25**

3.12 Nonpriority creditor's name and mailing address

Gordon Food Services
PO Box 2825
Grand Rapids, MI 49501

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$2,100.00**

3.13 Nonpriority creditor's name and mailing address

Grand Haven Board Light/Power
1700 Eaton Dr.
Grand Haven, MI 49417

Date(s) debt was incurred _____

Last 4 digits of account number **1001**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$2,635.28**

3.14 Nonpriority creditor's name and mailing address

Grand Haven Public Works
City of Grand Haven
519 Washington Ave
Grand Haven, MI 49417

Date(s) debt was incurred _____

Last 4 digits of account number **0100**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes**\$458.80**

Debtor	Two Yolks Cafe, LLC Name	Case number (if known) _____
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3.15	Nonpriority creditor's name and mailing address Heartland Payroll 2001 Aerospace Pkwy Brookpark, OH 44142 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
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3.16	Nonpriority creditor's name and mailing address Johnson Controls 108-152 W 28th St. Holland, MI 49423 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,266.57
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3.17	Nonpriority creditor's name and mailing address Michigan Gas Utilities PO Box 1109 Glenview, IL 60025 Date(s) debt was incurred _____ Last 4 digits of account number <u>0005</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$454.71
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3.18	Nonpriority creditor's name and mailing address Motio LLC 22 South Harbor Dr. Grand Haven, MI 49417 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Tech/IT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,016.28
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3.19	Nonpriority creditor's name and mailing address Northside Heat, Cool, Ref. Inc 2145 Jenna Lane Muskegon, MI 49445 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,350.19
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3.20	Nonpriority creditor's name and mailing address Rausch Sturm LLP 300 N. Executive Drive Suite 200 Brookfield, WI 53005 Date(s) debt was incurred _____ Last 4 digits of account number <u>0558</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Discover Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,438.58
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3.21	Nonpriority creditor's name and mailing address Sequium Asset Solutions, LLC 2700 Cumberland Parkway Suite 200 Atlanta, GA 30339 Date(s) debt was incurred _____ Last 4 digits of account number <u>5480</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rollins Service Bureau</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.97
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Debtor	Two Yolks Cafe, LLC Name	Case number (if known) _____
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3.22	Nonpriority creditor's name and mailing address Spectrum PO Box 94188 Palatine, IL 60094-4188 Date(s) debt was incurred _____ Last 4 digits of account number <u>7754</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$269.37 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address State Farm Ins. Companies PO Box 680001 Dallas, TX 75368-0001 Date(s) debt was incurred _____ Last 4 digits of account number <u>1504</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,843.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address Toast Inc/WebBank 333 Summer St Boston, MA 02210 Date(s) debt was incurred _____ Last 4 digits of account number <u>a3ba</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37,410.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	Nonpriority creditor's name and mailing address Toast Inc/WebBank 333 Summer St Boston, MA 02210 Date(s) debt was incurred _____ Last 4 digits of account number <u>c8ec</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,030.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.26	Nonpriority creditor's name and mailing address Toast Inc/WebBank 333 Summer St Boston, MA 02210 Date(s) debt was incurred _____ Last 4 digits of account number <u>283a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,832.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.27	Nonpriority creditor's name and mailing address Trinity Health-Realestate Serv 1101 S. Beacon Boulevard LLC 1309 Sheldon Road Grand Haven, MI 49417 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$46,514.67 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Lease for Business Location</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	Nonpriority creditor's name and mailing address U.S Small Business Admin. P.O. Box 3918 Portland, OR 97208 Date(s) debt was incurred <u>05.20.2020</u> Last 4 digits of account number <u>7402</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$83,337.87 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Part of Purchase Agreement-Take on SBA Loan from Prior Two Yolks Owner</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Two Yolks Cafe, LLC**
Name

Case number (if known)

3.29	Nonpriority creditor's name and mailing address VanderHyde Mechanical Inc Heating, Cooling, Electrical 14200 Ironwood Dr. NW Grand Rapids, MI 49534 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoices 32409481, 33535121 and 33569586</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,552.34
3.30	Nonpriority creditor's name and mailing address VitalCap Emerald Group Holdings 48 Wall St. 10th Floor New York, NY 10005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,400.00
3.31	Nonpriority creditor's name and mailing address VitalCap Emerald Group Holdings 48 Wall St. 10th Floor New York, NY 10005 Date(s) debt was incurred ____ Last 4 digits of account number <u>7245</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,542.00
3.32	Nonpriority creditor's name and mailing address Waste Management WM Chief Legal Officer 800 Capitol St Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number <u>3334</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$606.77
3.33	Nonpriority creditor's name and mailing address Waste Management WM Chief Legal Officer 800 Capitol St Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.34	Nonpriority creditor's name and mailing address Webstraunt Rewards/FNBO PO Box 2818 Omaha, NE 68103 Date(s) debt was incurred ____ Last 4 digits of account number <u>8525</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,569.98

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Debtor **Two Yolks Cafe, LLC**

Name

Case number (if known)

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Chris Baldridge 5333 McAuley Dr. Suite 1117 Ypsilanti, MI 48197	Line <u>3.27</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Commercial Bank-BLP Dept ATTN: Alma BLP 301 N. State St. Alma, MI 48801	Line <u>3.7</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Commercial Bank-BLP Dept ATTN: Alma BLP 301 N. State St. Alma, MI 48801	Line <u>3.8</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Discover Bank P.O. Box 6103 Carol Stream, IL 60197-6103	Line <u>3.20</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	Global Payments Direct, Inc. 3550 Lenox Road Suite 3000 Atlanta, GA 30326	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.7	Internal Revenue Service-Grand 3251 North Evergreen Drive NE M/S Insolvency Grand Rapids, MI 49525	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.8	Johson Controls 3312 Lousma Dr SE Grand Rapids, MI 49548	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	—
4.9	Michigan Department of Treasur P.O. Box 30785 Lansing, MI 48909	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 91,000.00
5b. +	\$ 331,611.88
5c.	\$ 422,611.88

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Commercial Lease for Cafe**

State the term remaining

3 Months--Eviction Process Started

List the contract number of any government contract _____

**Trinity Health-Realestate Serv
1101 S. Beacon Boulevard LLC
1309 Sheldon Rd.
Grand Haven, MI 49417**

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	Joanna and Mark Peterson	1106 Pennoyer Ave Grand Haven, MI 49417 Cross-Collateralization with Home	Commercial Bank-Greenville	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2	Joanna and Mark Peterson	1106 Pennoyer Ave Grand Haven, MI 49417	Commercial Bank-Greenville	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
2.3	Joanna and Mark Peterson	1106 Pennoyer Ave Grand Haven, MI 49417	Commercial Bank-Greenville	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
2.4	Joanna Peterson	1106 Pennoyer Ave Grand Haven, MI 49417	U.S Small Business Admin.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.28</u> <input type="checkbox"/> G _____
2.5	Mark Peterson	1106 Pennoyer Ave Grand Haven, MI 49417	U.S Small Business Admin.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.28</u> <input type="checkbox"/> G _____

Debtor Two Yolks Cafe, LLC

Case number *(if known)* _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor

Column 2: Creditor

Fill in this information to identify the case:Debtor name Two Yolks Cafe, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/25

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2025 to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)\$190,000.00**For prior year:**From 1/01/2024 to 12/31/2024☒ Operating a business☐ Other _____\$478,402.18**For year before that:**From 1/01/2023 to 12/31/2023☒ Operating a business☐ Other _____\$568,485.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
Check all that apply

Debtor **Two Yolks Cafe, LLC**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. VitalCap Emerald Group Holdings 48 Wall St. 10th Floor New York, NY 10005	Payments of \$213.00 Five a week from 2/2/25 to 5/12/2025 (57 Total) 4 payments of \$100: 5/13, 5/14, 5/15 and 5/16	\$12,541.00	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____
3.2. Gordon Food Services PO Box 2825 Grand Rapids, MI 49501	34 Payments between 2/24/2025 to 5/14/2025	\$24,683.06	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Debtor **Two Yolks Cafe, LLC**

Case number (if known)

☒ None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
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Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Reisinger Law Firm PLLC 4131 Embassy Drive SE Grand Rapids, MI 49546		2/10/2025 and 5/12/2025	\$1,750.00

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property - by sale, trade, or any other means - made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

Debtor **Two Yolks Cafe, LLC**

Case number (if known) _____

☐ None.Who received transfer?
AddressDescription of property transferred or
payments received or debts paid in exchangeDate transfer
was madeTotal amount or
value**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☐ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ NoneFinancial Institution name and
AddressLast 4 digits of
account numberType of account or
instrumentDate account was
closed, sold,
moved, or
transferredLast balance
before closing or
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **Two Yolks Cafe, LLC**

Case number (if known) _____

☐ None

Depository institution name and address

Names of anyone with
access to it
Address

Description of the contents

Does debtor
still have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address

Names of anyone with
access to it

Description of the contents

Does debtor
still have it?**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.☐ No.☐ Yes. Provide details below.Case title
Case numberCourt or agency name and
address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

Debtor **Two Yolks Cafe, LLC**

Case number (if known)

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☒ None

Name and address**Date of service
From-To**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address**If any books of account and records are
unavailable, explain why**

26c.1. **Jason Lillmars, CPA
Strategic CPA Acct. & Tax Sol.
2922 Fuller Ave NE
Suite 101B
Grand Rapids, MI 49505**

Tax Preparer

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory****28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.****Name****Address****Position and nature of any
interest
Member and Registered
Agent****% of interest, if
any
50%****Joanna Peterson****1106 Pennoyer Ave
Grand Haven, MI 49417****Name****Address****Position and nature of any
interest
Member****% of interest, if
any
50%****Mark Peterson****1106 Pennoyer Ave
Grand Haven, MI 49417**

Debtor **Two Yolks Cafe, LLC**

Case number (if known)

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
--------------------------	--

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 20, 2025**

/s/ Joanna Peterson
 Signature of individual signing on behalf of the debtor

Joanna Peterson
 Printed name

Position or relationship to debtor **Member/Registered Agent**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☐ Yes

**United States Bankruptcy Court
Western District of Michigan**

In re **Two Yolks Cafe, LLC**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Member/Registered Agent of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **May 20, 2025**

/s/ Joanna Peterson

Joanna Peterson/Member/Registered Agent
Signer/Title

ABC/AMEGA
500 SENECA ST. SUITE 503
BUFFALO NY 14204

AMERICAN EXPRESS
PO BOX 981535
EL PASO TX 79998

BEYOND FINANCE
P.O. BOX 660442
DALLAS TX 75266

BONNIE NOLAN
43 ELM CT.
MUSKEGON MI 49445

CAPITAL ONE BUSINESS
PO BOX 4069
CAROL STREAM IL 60197

CHASE BANK
340 S. CLEVELAND AVE BLDG 370
WESTERVILLE OH 43081

CHRIS BALDRIDGE
5333 MCAULEY DR.
SUITE 1117
YPSILANTI MI 48197

COMMERCIAL BANK-BLP DEPT
ATTN: ALMA BLP
301 N. STATE ST.
ALMA MI 48801

COMMERCIAL BANK-BLP DEPT
ATTN: ALMA BLP
301 N. STATE ST.
ALMA MI 48801

COMMERCIAL BANK-BLP DEPT
ATTN: ALMA BLP
301 N. STATE ST.
ALMA MI 48801

COMMERCIAL BANK-GREENVILLE
10530 W. CARSON CITY RD
PO BOX 607
GREENVILLE MI 48838

COMMERCIAL BANK-GREENVILLE
10530 W. CARSON CITY RD
PO BOX 607
GREENVILLE MI 48838

COMMERCIAL BANK-GREENVILLE
10530 W. CARSON CITY RD
PO BOX 607
GREENVILLE MI 48838

COZZINI
8430 W BRYN MAWR AVE
SUITE 800
CHICAGO IL 60631

DISCOVER BANK
P.O. BOX 6103
CAROL STREAM IL 60197-6103

ELECTRICAL MAINTENANCE CORP
16710 JUNIPER DR.
CONKLIN MI 49403

FLAGSTAR BANK
ATTN BK
5151 CORPORATE DR.
TROY MI 48098

GLOBAL PAYMENTS DIRECT, INC.
3550 LENOX ROAD
SUITE 3000
ATLANTA GA 30326

GORDON FOOD SERVICES
PO BOX 2825
GRAND RAPIDS MI 49501

GRAND HAVEN BOARD LIGHT/POWER
1700 EATON DR.
GRAND HAVEN MI 49417

GRAND HAVEN PUBLIC WORKS
CITY OF GRAND HAVEN
519 WASHINGTON AVE
GRAND HAVEN MI 49417

HEARTLAND PAYROLL
2001 AEROSPACE PKWY
BROOKPARK OH 44142

INTERNAL REVENUE SERVICE
P.O. BOX 21125
PHILADELPHIA PA 19114

INTERNAL REVENUE SERVICE
P.O. BOX 7346
PHILADELPHIA PA 19101-7346

INTERNAL REVENUE SERVICE-GRAND
3251 NORTH EVERGREEN DRIVE NE
M/S INSOLVENCY
GRAND RAPIDS MI 49525

JOANNA AND MARK PETERSON
1106 PENNOYER AVE
GRAND HAVEN MI 49417

JOANNA AND MARK PETERSON
1106 PENNOYER AVE
GRAND HAVEN MI 49417

JOANNA AND MARK PETERSON
1106 PENNOYER AVE
GRAND HAVEN MI 49417

JOANNA PETERSON
1106 PENNOYER AVE
GRAND HAVEN MI 49417

JOHNSON CONTROLS
108-152 W 28TH ST.
HOLLAND MI 49423

JOHSON CONTROLS
3312 LOUSMA DR SE
GRAND RAPIDS MI 49548

MARK PETERSON
1106 PENNOYER AVE
GRAND HAVEN MI 49417

MICHIGAN DEPARTMENT OF TREASUR
P.O. BOX 30199
LANSING MI 48909-7699

MICHIGAN DEPARTMENT OF TREASUR
P.O. BOX 30785
LANSING MI 48909

MICHIGAN GAS UTILITIES
PO BOX 1109
GLENVIEW IL 60025

MOTIO LLC
22 SOUTH HARBOR DR.
GRAND HAVEN MI 49417

NORTHSIDE HEAT, COOL, REF. INC
2145 JENNA LANE
MUSKEGON MI 49445

RAUSCH STURM LLP
300 N. EXECUTIVE DRIVE
SUITE 200
BROOKFIELD WI 53005

SEQUIUM ASSET SOLUTIONS, LLC
2700 CUMBERLAND PARKWAY
SUITE 200
ATLANTA GA 30339

SPECTRUM
PO BOX 94188
PALATINE IL 60094-4188

STATE FARM INS. COMPANIES
PO BOX 680001
DALLAS TX 75368-0001

TOAST INC/WEBBANK
333 SUMMER ST
BOSTON MA 02210

TOAST INC/WEBBANK
333 SUMMER ST
BOSTON MA 02210

TOAST INC/WEBBANK
333 SUMMER ST
BOSTON MA 02210

TRINITY HEALTH-REALESTATE SERV
1101 S. BEACON BOULEVARD LLC
1309 SHELDON ROAD
GRAND HAVEN MI 49417

TRINITY HEALTH-REALESTATE SERV
1101 S. BEACON BOULEVARD LLC
1309 SHELDON RD.
GRAND HAVEN MI 49417

U.S SMALL BUSINESS ADMIN.
P.O. BOX 3918
PORTLAND OR 97208

VANDERHYDE MECHANICAL INC
HEATING, COOLING, ELECTRICAL
14200 IRONWOOD DR. NW
GRAND RAPIDS MI 49534

VITALCAP
EMERALD GROUP HOLDINGS
48 WALL ST. 10TH FLOOR
NEW YORK NY 10005

VITALCAP
EMERALD GROUP HOLDINGS
48 WALL ST. 10TH FLOOR
NEW YORK NY 10005

WASTE MANAGEMENT
WM CHIEF LEGAL OFFICER
800 CAPITOL ST
HOUSTON TX 77002

WASTE MANAGEMENT
WM CHIEF LEGAL OFFICER
800 CAPITOL ST
HOUSTON TX 77002

WEBSTRAUNT REWARDS/FNBO
PO BOX 2818
OMAHA NE 68103

**United States Bankruptcy Court
Western District of Michigan**

In re **Two Yolks Cafe, LLC**

Debtor(s)

Case No.
Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Two Yolks Cafe, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

May 20, 2025

Date

/s/ Bronte Reisinger

Bronte Reisinger P84320

Signature of Attorney or Litigant
Counsel for **Two Yolks Cafe, LLC**

Reisinger Law Firm PLLC

4131 Embassy Drive SE

Grand Rapids, MI 49546

616.323.3164 Fax:877.647.8276

bkreisinger@reisingerlaw.com